| Application or Docket Number | | | | | | | | | | |
|---|---------------------------|------------------------------------|------------------|----------------|-------------------|--|------------|-------------|-----------------------|--|
| PATENT APPLICATION | | | ON RECOR | D | | | | : | ٠, | |
| Effective October 1, 2000 | | | | | 5756-093-30 | | | | | |
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | TITY | | OTHER | | |
| | TYPE | _ | | OR | SHALL | | | | | |
| TOTAL CLAIMS | 21 | | RA | TE | FEE 355.00 | | RATE | FEE | | |
| FOR | NUMBER FILED | NUMB | NUMBER EXTRA | | EASIC FEE | | OR | DASIC FEE | 710.00 | |
| TOTAL CHARGEABLE CLAIMS | 37 minus 20- | nus 20= 7 | | X\$ | X\$ 90 6 | | OR | . X\$18= | | |
| INDEPENDENT CLAIMS . | if minus 3 = | minus 3 = / | | X4 | X40= 4°C | | OR | X80= | | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | +13 | +135= 135 | | OR | +270= | | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | TO | TAL | 4:5 | OA | TOTAL | | | |
| CLAIMS AS AMENDED - PART II OTHER TH | | | | | | | | THAN | | |
| 5/3//05 (Column 1) (Column 2) (Column 3) | | | | SM | ALL | ENTITY | OR | SWALL | | |
| | NA. | HEST MSGR | PRESENT | RA | TE | ADDI- TIONAL | | RATE | ADDI- TIONAL | |
| AFTER AMERICANENT | | nously D FOR | EXTRA | | - | FEE | | | FEE | |
| REMARKING AFTER AMERICANENT | Minus -6 | ?7 | o — | X\$ | 9 = | | OR | X\$18= | | |
| Independent • / | | 4 | • - | · X4 | 0- | | ОЯ |)CBO= | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | +13 | 5- | | OR | +270= | | | | |
| | : | | | - | OTAL | • | OR | TOTAL | | |
| (2-5-05 (Column 1) | eri. | M | Makes M | MODE | FEE | | , | ADOIT. FEE | | |
| (2-5-6) (Column 1) | 1434 | umn 2) Hest | (Column 3) | | | ADDI- | 1 | | ADDI- | |
| REMAINING | PRE | MBER MOUSLY D FOR | PRESENT EXTRA | RA | TE | TIONAL | | RATE | TIONA | |
| Total - 3 | Minus | <u> </u> | . / | X 3 | 9- | 1 | OR | X\$18= | | |
| Independent | Minus | 4 | - / | Y | 0- | / | OR | Vah | | |
| FIRST PRESENTATION OF | MULTIPLE DEPENDE | NT CLAIM | | | | - | 10" | / | E V | |
| | , | | | | 35- | | OR | | | |
| | | | | OTAL C. PEE | | OR | ADOIT, FEE | • | | |
| 5/12/0 C(Column 1) (Column 2) (Column 8) | | | | | | | | | | |
| CLAIMS REMAINING AFTER AMERICANEN | NA NA PRE | SHEST MOER VIOUSLY ED FOR | PRESENT EXTRA | R | TE | ADDI- TIONAL FEE | | RATE | ADDI- TIONA FEE | |
| Total • 13 | Mous in | 37 | . e | × | 9= | | OR | X\$18- | | |
| Independent • 2 | Maria | 4. | . 0 | X4 | 10= | | OR | X80= | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | 35= | | OR | | • | |
| * If the stry in column 1 is test than the entry in column 2, write "0" in column 3. | | | | | OTAL | | 4 | TOTAL | - | |
| " If the Tripped Hamb I Producely Paid For DI THIS SPACE IS NOT THE TOTAL | | | | | L FEE | | Tou | ADDIT. FEE | | |
| The Tighest Hunder Provincely | Paid For (Total or Indepe | ndent) is th | e highest numb | r tound in | De 4 | d edal-spoog | ez in e | okenn 1. | | |
| SOME STATE OF THE | | | | Part of | 47- | - CO- | U.S. CI | EMATIMENT O | F COLDAN | |
| Popul Proces | | | • | | - | | | 44 00 m | - Criston | |